



SUFFOLK COUNTY OFFICE OF

CONSUMER AFFAIRS

GASOLINE DISTRIBUTORS REGISTRATION

1. Business Name _____
2. Address _____ Phone _____
3. If your business is not located in Suffolk County, please indicate the address of your local office _____ Phone _____
4. Name of the person to be contacted concerning the operation of your company in Suffolk County _____
5. If the applicant has any of the following, please indicate the number:
New York State DOT Common Carrier Certificate # _____
New York State Tax Identification # _____
New York State Motor Fuel Tax Registration # _____
6. Type of business (Terminal, Operator, Broker, Transporter, Etc.) _____
7. Form of Business:
Individual proprietorship _____ Partnership _____
Individual proprietorship operating under a d/b/a or assumed name _____
Corporation incorporated under New York State Law _____
Foreign corporation incorporated under the laws of _____ (State)
8. If a partnership, please list names and addresses of principals:
Name _____ Address _____
Name _____ Address _____
Name _____ Address _____
9. If a corporation, please list names and addresses of officers:
President _____ Address _____
Vice-Pres. _____ Address _____
Secy. _____ Address _____
Treas. _____ Address _____
10. What petroleum products are distributed, transported or sold by you?
_____ Gasoline _____ Diesel Fuel _____ Special Fuels _____ Aviation Fuel _____
_____ Other (please specify) _____
11. From which terminals do you pick up products which you distribute, sell, transport, etc.?
Name of location _____ Address _____
Name of location _____ Address _____
IF THERE ARE MORE LOCATIONS, PLEASE ATTACH A LIST TO THIS APPLICATION.
12. Do you own any vehicles that are used to transport gasoline within Suffolk County? Yes ___ No ___

If YES, please attach a list of any vehicles that are owned by the applicant and are used to transport gasoline within Suffolk County, with a copy of the DMV registrations. Suffolk County Law requires the posting of a decal on the outside of all such vehicles.

DECLARATION (To be completed by applicant)

I declare under penalties of the Penal Law, that I prepared this application and that the statements contained therein are, to the best of my knowledge and belief, true and correct and that I have not knowingly and willfully made a false statement or given information which I know to be false in connection therewith.

Signed _____ Date _____